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ABSTRACT

The individual assessment and decision making procedure in cases of handicapped children of 12 individuals were surveyed and described in detail. Four school psychologists, four special educators, and four regular educators were selected randomly from those who had participated in a computer simulated assessment and decision making exercise. The descriptions revealed considerable variability within and among individuals and highlighted the fact that group findings do not necessarily represent individuals within the group. (Author)

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University of Minnesota

Research Report No. 33

PSYCHOEDUCATIONAL ASSESSMENT AND DECISION MAKING: INDIVIDUAL CASE STUDIES

James E. Ysseldyke, Bob Algozzine, Richard R. Regan,
Margaret Potter and Linda Richey

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I. Adequacy of Norm-Referenced Data for Prediction of Success

II. Computer Simulation Research on the Assessment/Decision-making/Intervention Process

III. Comparative Research on Children Labeled LD and Children Failing Academically but not Labeled LD

IV. Surveys on In-the-Field Assessment, Decision Making, and Intervention

V. Ethological Research on Placement Team Decision Making

VI. Bias Following Assessment

VII. Reliability and Validity of Formative Evaluation Procedures

VIII. Data-Utilization Systems in Instructional Programming

Additional information on these research areas may be obtained by writing to the Editor at the Institute.

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Abstract

The individual assessment and decision-making procedures of 12 individuals were surveyed and described in detail. Four school psychologists, four special educators, and four regular educators were selected randomly from those who had participated in a computer-simulated assessment and decision-making exercise. The descriptions revealed considerable variability within and among individuals and highlighted the fact that group findings do not necessarily represent individuals within the group.

Table of Contents

	Page
CHAPTER I: Introduction	1
Rationale	1
Methodology of Computer-Simulated Investigation	2
Subjects	2
Procedure	3
Referral conditions	4
Dependent variables	4
Methodology of Case Study Investigation	5
Subjects	5
Procedure	6
CHAPTER II: School Psychologist Case Studies	8
Case 1: Ms. A	8
Background	8
Pretest performances and expectations	9
Review of assessment data	9
Outcome decisions	10
Factors believed to influence decisions	10
Efficacy of the computer simulation	11
Summary	11
Case 2: Mr. B	12
Background	12
Pretest performances and expectations	12
Review of assessment data	13
Outcome decisions	13
Factors believed to influence decisions	13
Efficacy of the computer simulation	14
Summary	14
Case 3: Ms. C	15
Background	15
Pretest performances and expectations	16
Review of assessment data	16
Outcome decisions	17
Factors believed to influence decisions	17
Efficacy of the computer simulation	18
Summary	18
Case 4: Ms. D	19
Background	19
Pretest performances and expectations	19
Review of assessment data	20
Outcome decisions	20
Factors believed to influence decisions	21
Efficacy of the computer simulation	21
Summary	22
CHAPTER III: Special Educator Case Studies	23
Case 5: Ms. E	23
Background	23
Pretest performances and expectations	23
Review of assessment data	24

Outcome decisions..... 24
Factors believed to influence decisions..... 25
Efficacy of the computer simulation..... 25
Summary..... 25
Case 6: Mr. F..... 26
Background..... 26
Pretest performances and expectations..... 27
Review of assessment data..... 27
Outcome decisions..... 28
Factors believed to influence decisions..... 28
Efficacy of the computer simulation..... 29
Summary..... 29
Case 7: Ms. G..... 30
Background..... 30
Pretest performances and expectations..... 30
Review of assessment data..... 31
Outcome decisions..... 31
Factors believed to influence decisions..... 32
Efficacy of the computer simulation..... 32
Summary..... 32
Case 8: Ms. H..... 33
Background..... 33
Pretest performances and expectations..... 34
Review of assessment data..... 34
Outcome decisions..... 35
Factors believed to influence decisions..... 35
Efficacy of the computer simulation..... 35
Summary..... 36

CHAPTER IV: Regular Educator Case Studies..... 37
Case 9: Mr. I..... 37
Background..... 37
Pretest performances and expectations..... 37
Review of assessment data..... 38
Outcome decisions..... 38
Factors believed to influence decisions..... 39
Efficacy of the computer simulation..... 39
Summary..... 40
Case 10: Ms. J..... 41
Background..... 41
Pretest performances and expectations..... 41
Review of assessment data..... 42
Outcome decisions..... 42
Factors believed to influence decisions..... 43
Efficacy of the computer simulation..... 43
Summary..... 43
Case 11: Ms. K..... 44
Background..... 44
Pretest performances and expectations..... 45
Review of assessment data..... 45

Outcome decisions..... 46
Factors believed to influence decisions..... 46
Efficacy of the computer simulation..... 47
Summary..... 47
Case 12: Mr. L..... 48
Background..... 48
Pretest performances and expectations..... 48
Review of assessment data..... 49
Outcome decisions..... 49
Factors believed to influence decisions..... 49
Efficacy of the computer simulation..... 50
Summary..... 50

CHAPTER V: Discussion..... 52

REFERENCES..... 55

FOOTNOTES..... 57

TABLES..... 58

CHAPTER I

Introduction

Despite increased attention to assessment and decision-making procedures in schools today, relatively little is known about what takes place. Ysseldyke, Algozzine, Regan, Potter, Richey, and Thurlow (1980) reported on a major investigation of the assessment and decision-making process. Using a computer-simulated methodology, they addressed the following major research objectives: (a) to identify the extent to which differences in naturally-occurring pupil characteristics cause decision makers to select different assessment devices and strategies; (b) To identify the extent to which differences in naturally-occurring pupil characteristics affect decisions reached about children; (c) To ascertain the extent to which those who assess and make decisions select technically adequate devices when options are available; (d) To ascertain the extent to which knowledge regarding assessment affects decision making. This report is a follow-up of the Ysseldyke et al. (1980) study. It looks at the same data from a second perspective, that of the individual decision maker, in order to provide a comprehensive description of the process that different professionals follow as they make specific kinds of psychoeducational decisions about specific kinds of students.

Rationale

Many changes are occurring in education that directly and significantly affect the roles of educators and the services provided to students. In recent years, educational personnel have been confronted with a multitude of state and federal rules and regulations that have necessitated

the development and enactment of procedures for providing all handicapped children with an appropriate education.

Educators strive to recognize individual differences in their efforts to determine what makes up an appropriate educational program for each child. When students are referred for psychoeducational assessment, considerable time and effort go into the collection of data and into the actual deliberations that lead to decisions. Different individuals are involved in this process (Poland, Ysseldyke, Thurlow, & Mirkin, 1979; Thurlow & Ysseldyke, 1979), and they approach the assessment and decision-making process from different perspectives. Given the team approach to decision making used in schools today, it is important not to forget the individual perspectives of team members. While several studies of the team process have been conducted (Applied Management Sciences, 1979; Fenton, Yoshida, Maxwell, & Kaufman, 1979; Hoff, Fenton, Yoshida, & Kaufman, 1978; Yoshida, Fenton, Maxwell, & Kaufman, 1978), investigations to date have not looked at the process followed by individual decision makers who are given information about the same referred student. Knowledge of individual differences among decision makers is a necessary step in improving our understanding of the complex set of variables that influence the assessment and decision-making process.

Methodology of Computer-Simulated Investigation

Subjects. Subjects who participated in the computer-simulated decision-making program were 159 educators and school psychologists in Minnesota. All participants were professionals who had previously participated in at least two placement team meetings. Subjects represented a broad spectrum of disciplines and experience in providing both direct

and indirect services in educational settings; included were 22 school psychologists, 44 special education teachers, 52 regular education teachers, 13 administrators, and 13 support personnel (counselors, nurses, social workers, etc.). A complete description of the subjects may be found in Ysseldyke et al. (1980).

Procedure. All subjects were administered a short 25-item pretest designed to measure general knowledge of measurement and assessment. At the same time, subjects were aksed to estimate their expectations for the percentages of children evidencing various handicapping conditions.

After the pretest, each of the subjects was asked to read a case folder description of a student and then participate in a diagnostic simulation program. The program permitted the subject to access information from an archive that included the results of a variety of assessment devices. Specifically, scores were available for intelligence, achievement, perceptual-motor, personality, and language tests; performance on adaptive behavior scales and the results of several forms of behavioral observation or behavior checklists also were included in the archive (see Appendix A-3[1] for a list of devices in each domain). In addition, for each assessment device selected, the subject had the option of obtaining technical information about the device and/or qualitative information about the child's performance on the device. The technical information included a brief description of the device as well as the psychometric characteristics reported in the test manual (see Appendix A-4 for examples of technical information). Qualitative information included such things as child's attention to task, anxiety level, and performance on individual items or subtests (see Appendix A-4 for examples). The subject was

allowed to select specific tests (e.g., WISC-R, ITPA, etc.) from the seven domains until he/she indicated readiness to make a diagnostic decision; the program then presented a series of outcome questions. Following these questions, the subject rated the influence of several factors on the decisions and then indicated how well the assessment and decision-making simulation exercise reflected actual real-world procedures. All scores and qualitative information contained in the computer archive indicated that student's test performance was within the average range.

Referral conditions. Prior to receiving the initial student referral description, each subject was randomly assigned to one of 16 treatment conditions. The child's sex, socioeconomic status, type of referral problem, and/or attractiveness were varied in each condition. The name was listed as Phyllis or William, and the problem was said to be either academic or behavioral in nature. In eight of the 16 conditions, the referral folder contained information indicating that the student's father was a bank vice president and the mother a realtor (high SES condition); in the other eight conditions subjects were told that the student's father was a bank janitor and the mother a check-out clerk at a local supermarket (low SES condition). Additionally, previously-judged photographs were attached to the case folders to produce an "attractive" or "unattractive" child.

It should be noted that the referral statements of the academic or behavioral "problems" were designed to reflect characteristics often found in regular education students.

Dependent variables. After reviewing the referral case folder and accessing the desired assessment information, each subject responded to

a series of outcome questions. Included were three diagnostic questions (e.g., to what extent do you believe the referred student is learning disabled?), three prognostic questions (e.g., to what extent do you believe the referred student will have difficulty acquiring math skills?), a question about appropriate placement, questions asking the subject to rate the perceived influence of different kinds of scores (e.g., to what extent did the pupil's scores on intelligence tests influence your decision?), and questions asking the subject to rate the perceived influence of pupil characteristics (e.g., to what extent did the pupil's sex influence your decision?). All questions except that on appropriate placement were in Likert scale format; the placement question required the subject to rank the appropriateness of each of six alternative placements.

Methodology of Case Study Investigation

Subjects. Three professional roles were selected for further study using an individual case study format: school psychologists, special educators, and regular educators. These roles were selected for further investigation because they are those most frequently involved in special education decision making (Poland et al., 1979; Thurlow & Ysseldyke, 1979) and were most frequently represented in the group of subjects participating in the simulated decision-making exercise. Among the individuals in each role, one subject was selected randomly from each of four subgroups. The subgroups were defined by the subjects' performance on the pretest of their knowledge of measurement and assessment (low, high) as well as ly the nature of the referral statement on the case file they had reviewed (see Table 1). The subjects' pretest performances and referral statement conditions were selected as the bases for further breakdown because these

were found most often to influence the decisions made (Ysseldyke et al., 1980). Thus, the data of four school psychologists were described in detail; one of these psychologists had obtained a low pretest score and had reviewed a student referred for academic difficulties, another had obtained a high pretest score and had reviewed a student referred for behavioral difficulties, another had obtained a low pretest score and had reviewed a student referred for behavioral difficulties, and another had obtained a high pretest score and had reviewed a student referred for academic difficulties. The same procedure was followed for special educators and regular educators.

Insert Table 1 about here

Procedure. The data from each selected subject were reviewed and a description written to address each individual's assessment and decision-making process. Six types of information about each case study were described. First, the subject's background was reviewed, with emphases on experience and education. Second, the professional's estimates for the percentages of various handicapping conditions were determined and compared to those of others within the same professional group. Table 2 summarizes the group data used for comparison purposes. Third, the assessment process of each individual was investigated; this included noting both the devices selected and the extent to which technical information and qualitative data were accessed. Fourth, the outcome decisions made by the subject were investigated; the decisions of interest were (a) eligibility and classification, (b) placement, and (c) prognosis. Fifth, the factors that the professional believed influenced his/her

decisions were summarized. Finally, the subject's perception of the efficacy of the computer simulation of the assessment and decision-making process was examined.

Insert Table 2 about here

CHAPTER II

School Psychologist Case Studies

This chapter presents summaries of the performances of school psychologists during the computer-simulated assessment and decision-making program. As indicated in Table 1, four school psychologists were selected--two with low pretest scores and two with high pretest scores. The low scoring psychologists were selected from those receiving referral information for conditions 2 and 11; the high-scoring psychologists were selected from those receiving referral information for conditions 8 and 10.

Case 1: Ms. A

The case presented to Ms. A for review and evaluation was a boy, aged 10 years 4 months, who had been referred for academic problems (see condition 2, Appendix E[1]). All data presented to Ms. A during the simulation indicated the boy was functioning within the normal range for a student his age.

Background. Ms. A was a 26 year old school psychologist employed by a suburban school district. She had completed both undergraduate and graduate studies in education and psychology. Her highest earned degree was a masters of science; she had completed six graduate courses since receiving her masters. Her academic preparation included five courses in special education, five assessment and/or measurement courses, and two courses in statistics.

Although Ms. A had no prior teaching experience with either exceptional or regular populations, she did have one year of experience in providing non-teaching support services to educational programs.

Pretest performance and expectations. Ms. A scored a 15 on the pretest (60% correct). This is in the lower range of scores obtained by school psychologists participating in the investigation.

Ms. A's expectations as to the incidence of various handicapping conditions is shown in Table 3. Her estimates of the percentage of handicapped individuals within each category were, for the most part, consistent with the average estimates for school psychologists (see Table 2 and Ysseldyke et al., 1980a). However, significant deviations from the means for school psychologists were noted in Ms. A's estimates of minority individuals exhibiting both academic difficulties and emotional disturbance and low SES individuals having learning disabilities.

Insert Table 3 about here

When asked whether current life circumstances, developmental history, or extra-personal factors should be considered in the assessment of an individual, she indicated that only current life circumstances and developmental history should be considered as important.

Review of assessment data. Eight assessment devices were selected for review by Ms. A: two intelligence tests, three achievement tests, two perceptual-motor tests, and one personality test (see Table 4). Ms. A accessed technical information for only one of the eight devices she reviewed, the Wide Range Achievement Test. She reviewed the qualitative information for the Wechsler Intelligence Scale for Children--Revised, the Stanford Achievement Test, the Peabody Individual Achievement Test, the Bender Visual-Motor Gestalt Test, and the Developmental Test of Visual-Motor Integration.

Insert Table 4 about here

Outcome decisions. (Eligibility and classification) Ms. A believed that the child was unlikely to be eligible for special education services. Ms. A was undecided as to whether the child was mentally retarded and whether he was emotionally disturbed. However, she did perceive the child as not being learning disabled.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), a series of possible placements within which to serve the child's educational needs, Ms. A's response was: 1 - regular class with consultation by resource teacher, 2 - part time resource room, 3 - regular class, 4 - full time resource room, 5 - full time special class, and 6 - extra-school setting.

(Prognosis) Ms. A perceived the child as being likely to have difficulty acquired reading and math skills. She was undecided as to the extent to which the child would demonstrate a speech problem.

Factors believed to influence decisions. Ms. A indicated that the child's performance on intellectual measures and measures of academic achievement had a very significant effect on her decisions. Factors having a significant effect included scores on perceptual-motor tests, adaptive behavior, discrepancies between expected and actual achievement, behavioral recordings, the referral statement of problems, and subtest score discrepancies. Ms. A felt that the child's socioeconomic status and the child's physical appearance had an insignificant effect on her decisions. The influence of the child's sex was deemed very insignificant; personality data and scores on language tests had no perceived

influence on the decisions she had made.

Efficacy of the computer simulation. Ms. A stated that the computer simulation differed from real-life placement decision-making practices in that it was very objective and lacked direct contact with the student. She felt that sufficient time to complete the activity was allowed, and stated that the referral information, achievement data, and intellectual scores were useful in arriving at her decisions. Additional information desired included observations of the child in the home.

Summary. Ms. A's estimates of the incidence of various handicapping conditions was, for the most part, consistent with the average estimates for school psychologists. Although Ms. A did not identify the child under review as exhibiting any of the handicapping conditions proposed in the simulation (i.e., MR, ED, LD), she did indicate that the student would have difficulty acquiring reading and math skills.

Ms. A reviewed eight assessment devices during her evaluation of the child. She made infrequent use of technical information related to each, but did access qualitative information for the majority of the devices. A review of her selection of assessment devices and her perception of their influence on her decision making suggested that the information selected might be a function of her understanding of the intent and purpose of those devices reviewed. Ms. A stated that adaptive behavior information and behavior recordings had a significant effect on her decisions even though she reviewed neither adaptive behavior nor behavior recording data during her evaluation of the child. A plausible explanation may be that she felt she had gleaned this information from the qualitative test performance information on those devices she had reviewed.

Case 2: Mr. B

The case presented to Mr. B for review and evaluation was a boy, aged 10 years 4 months, who had been referred for behavior problems (see condition 8, Appendix E). All data presented to Mr. B during the simulation indicated the boy was functioning within the normal range for a student his age.

Background. Mr. B was a 44 year old school psychologist employed by a suburban school district. He had completed doctoral work in educational psychology and was a licensed consulting psychologist, yet he had taken no graduate courses since receiving his degree. Mr. B's academic preparation included four special education courses, four assessment and/or measurement courses, and three courses in statistics.

Mr. B had 11 years of teaching experience with regular education programs, but no teaching experience with exceptional children. In addition, Mr. B had 11 years of experience providing non-teaching support services to educational programs.

Pretest performance and expectations. Mr. B scored a 23 on the pretest (92% correct). This is in the upper range of scores obtained by school psychologists participating in the investigation.

Mr. B's expectations as to the incidence of various handicapping conditions is presented in Table 5. Mr. B's estimates of the percentages of handicapped individuals within each category generally were consistent with the average estimates for school psychologists (see Table 2 and Ysseldyke et al., 1980); no significant deviations from the mean estimates for school psychologists were noted.

Insert Table 5 about here

When asked whether current life circumstances, developmental history, or extra-personal factors should be considered in the assessment of an individual, Mr. B indicated that all factors should be considered.

Review of assessment data. Four assessment devices were selected for review by Mr. B: one intelligence measure, one achievement test, one perceptual-motor test, and one personality measure (see Table 6). Technical information and qualitative performance for all of these measures were reviewed by Mr. B.

Insert Table 6 about here

Outcome decisions. (Eligibility and classification) Mr. B believed the child was very likely to be eligible for special education services. He felt that the child was very likely to be learning disabled, likely to be emotionally disturbed, but not mentally retarded.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), a series of possible placements within which to serve the child's educational needs, Mr. B's response was: 1 - regular class with consultation by resource teacher, 6 - regular class/part time resource room/full time resource room/full time special education/extra-school setting.

(Prognoses) Mr. B perceived the child as being very likely to have difficulty acquiring reading and math skills, but very unlikely to demonstrate speech problems.

Factors believed to influence decisions. Mr. B indicated that the child's performance on intellectual measures, measures of academic achievement, and the discrepancies between expected and actual achievement had

a very significant effect on his decisions. Factors having a significant effect included scores on perceptual-motor tests, adaptive behavior information, personality test data, behavioral recordings, the referral statement of problems, and subtest score discrepancies. The child's sex and socioeconomic status were indicated to have an insignificant effect on his decisions. The child's physical appearance was perceived as a very insignificant factor, while scores on language tests had no perceived influence on his decisions.

Efficacy of the computer simulation. Mr. B stated that the computer simulation differed from real-life placement decision-making practices to the extent that test information is not as readily available in real life. In addition, he felt that he would have preferred to spend some time with the teacher and parents discussing the child's behavior at school and in the home. Mr. B believed that he had sufficient time to complete the simulation activity and stated that both behavioral information related to testing (qualitative information) and the specific test scores were useful in arriving at his decisions. Additional information desired for decision making included data related to the child's actual placement and progress in the classroom.

Summary. Mr. B's estimates of the incidence of various handicapping conditions were consistent with the mean estimates obtained from all school psychologists participating in the investigation. Mr. B perceived the child as being very likely to be eligible for special education services. He also felt that the child was either learning disabled or emotionally disturbed, and indicated that the child was very likely to have difficulty acquiring both mathematics and reading skills.

Mr. B reviewed four assessment devices during his evaluation of the child. He accessed both technical and qualitative information for all of the devices. A review of the selection of assessment devices by Mr. B and the perception of their influence on his decisions suggests that the information selected might be a function of his understanding of the intent and purpose of those devices reviewed. Mr. B stated that behavior recordings and adaptive behavior information had a significant effect on his decisions, even though he reviewed neither adaptive behavior nor behavior recordings during his evaluation of the child. A plausible hypothesis may be that information "perceived" as behavioral recordings or adaptive behavior data was actually qualitative test performance information.

Case 3: Ms. C

The case presented to Ms. C for review and evaluation was a girl, aged 10 years 4 months, who had been referred for behavior problems (see condition 11, Appendix E). All data presented to Ms. C during the simulation indicated the girl was functioning within the normal range for a student her age.

Background. Ms. C was a 30 year old school psychologist employed by a suburban school district. Her highest earned degree was a doctorate of philosophy; she had not taken any graduate courses since the completion of the degree. Her academic preparation included 20 courses in special education, three assessment and/or measurement courses, and two courses in statistics.

Ms. C had no prior direct teaching experience with either exceptional

or regular populations, although she did have six years of experience in providing non-teaching support services to educational programs.

Pretest performance and expectations. Ms. C scored a 16 on the pretest (64% correct). This is in the lower range of scores obtained by school psychologists participating in the investigation.

Ms. C's expectations as to the incidence of various handicapping conditions is shown in Table 7. Her estimates of the percentages of handicapped individuals within each category were considerably high for minority and low SES students when compared with the average estimates for school psychologists (see Table 2 and Ysseldyke et al., 1980a). In addition, several deviations from the means for all school psychologists were noted in her estimates of high SES individuals and boys exhibiting specific handicapping conditions. Ms. C's estimates for girls were comparable to the mean estimates of all school psychologists in the investigation.

Insert Table 7 about here

When asked whether current life circumstances, developmental history, or extra-personal factors should be considered in the assessment of an individual, Ms. C indicated that all factors should be considered important.

Review of assessment data. Six assessment devices were selected for review by Ms. C: one intelligence test, two achievement measures, two behavioral recordings, and one language test (see Table 8). Ms. C accessed the technical information for only two of the six devices she

reviewed, the Peterson-Quay Behavior Problem Checklist and the Event Recordings, and qualitative information for three devices, the Wechsler Intelligence Scale for Children - Revised, the Peabody Individual Achievement Test, and the Peterson-Quay Behavior Problem Checklist.

Insert Table 8 about here

Outcome decisions. (Eligibility and classification) Ms. C believed the child was likely to be eligible for special education services, but that the child was very unlikely to be either emotionally disturbed or mentally retarded and unlikely to be learning disabled.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), a series of potential placements within which to serve the child's educational needs, Ms. C's response was: 1 - regular class/regular class with consultation by resource teacher, 3 - part time resource room, and 6 - full time resource room/ full time special class/extra-school setting.

(Prognoses) Ms. C perceived the child as being likely to have difficulty acquiring reading skills, unlikely to have difficulty acquiring math skills, and very unlikely to demonstrate speech problems.

Factors believed to influence decisions. Ms. C indicated that scores on intellectual measures, measures of academic achievement, perceptual-motor tests, the discrepancies between expected and actual achievement, the child's physical appearance, behavioral recordings, subtest score discrepancies, and scores on language devices all had a very significant effect on her decision making. Personality test data

were perceived as having a significant effect. Factors having an insignificant or no effect included the child's sex, socioeconomic status, the referral statement of problems, and adaptive behavior information.

Efficacy of the computer simulation. Ms. C felt that the computer simulation differed from real-life placement and decision-making practices to the extent that she had no opportunity to interview significant others (e.g., teacher, staff, parents, siblings). She believed sufficient time was provided to complete the activity. No specific type of information was thought to be more useful than any other in her decision making. Additional information desired included interviews and direct observation.

Summary. Ms. C's estimates of the percentages of handicapped individuals within each category were consistently high for minority and low SES when compared with the mean estimates for school psychologists. Her most consistent estimates were for girls. Ms. C believed the child was likely to be eligible for special education services; however, she did not identify the child being reviewed as exhibiting any of the handicapping conditions presented in the simulation (i.e., MR, LD, ED). She did indicate that the child was likely to have difficulty acquiring reading skills.

Ms. C reviewed six assessment devices during her evaluation of the child. She made infrequent use of both the technical and qualitative information related to each device. A review of her selection of assessment devices and her perception of their influence on her decision making suggested that the information selected might be a function of her understanding of the intent and purpose of those devices reviewed. She

indicated that both perceptual-motor tests and personality test data had a significant effect on her decisions, even though she reviewed no tests from either domain. Some personality information may have been derived from qualitative test performance data. However, specific perceptual-motor information and data relevant to individual personality characteristics could only be accessed through devices listed under those domains.

Case 4: Ms. D

The case presented to Ms. D for review and evaluation was a girl, aged 10 years 4 months, who had been referred for academic problems (see condition 10, Appendix E). All data presented to Ms. D indicated the girl was functioning within the normal range for a student her age.

Background. Ms. D was a 31 year old school psychologist employed by a suburban school district. She had completed doctoral work in educational psychology and was a licensed consulting psychologist; she had taken no graduate courses since receiving the degree. Her academic preparation included four courses in special education, three courses in assessment and/or measurement, and six courses in statistics.

Ms. D had no prior direct teaching experience with either exceptional or regular populations, yet she did have four years of experience providing non-teaching support services to educational programs.

Pretest performance and expectations. Ms. D scored a 23 on the pretest (92% correct). This is in the upper range of scores obtained by school psychologists participating in the investigation.

Ms. D's expectations as to the incidence of various handicapping

conditions are presented in Table 9. Her estimates of the percentages of handicapped individuals within each category were comparable to or slightly below the average estimates for school psychologists (see Table 2 and Ysseldyke et al., 1980a). Her estimates for sensory impairments were uniformly below the mean estimates of all school psychologists in the investigation. Also, Ms. D's incidence estimates for minority, low SES, and high SES children exhibiting behavior problems were lower than the mean estimates.

Insert Table 9 about here

When asked whether current life circumstances, developmental history, or extra-personal factors should be considered in the assessment of an individual, she indicated that all three factors were important.

Review of assessment data. Six assessment devices were selected for review by Ms. D: one intelligence test, two achievement measures, one perceptual-motor device, a behavioral recording, and a personality measure (see Table 10). Ms. D accessed the technical information for only one of these devices, the Peterson-Quay Behavior Problem Checklist, and reviewed the qualitative information for all devices except the Peterson-Quay Behavior Problem Checklist and the Thematic Apperception Test.

Insert Table 10 about here

Outcome decisions. (Eligibility and classification) Ms. D believed the child was unlikely to be eligible for special education services, and

indicated that the child was very unlikely to be mentally retarded or emotionally disturbed. However, she did believe the child was likely to be learning disabled.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), a series of possible placements within which to serve the child's educational needs, her response was: 1 - part time resource room, 2 - regular class with consultation by resource teacher, 3 - full time resource room, 4 - regular class, 6 - full time special class/extra-school setting.

(Prognoses) Ms. D perceived that the child was likely to demonstrate a speech problem, yet unlikely to have difficulty acquiring either reading or math skills.

Factors believed to influence decisions. Ms. D indicated that adaptive behavior information had a very significant effect on her decisions. Factors having a significant effect included scores on intellectual measures, measures of academic achievement, discrepancies between expected and actual achievement, behavioral recordings, and subtest score discrepancies. She felt that personality data and the referral statement of problems had an insignificant effect. Very insignificant factors included the child's sex, socioeconomic status, physical appearance, and scores on language tests. Scores on perceptual-motor measures had no perceived influence on her decisions.

Efficacy of the computer simulation. Ms. D stated that the computer simulation differed from real-life placement decision-making practices in that she had no chance to talk to the teacher about the child's classroom situation or to observe. In addition, she indicated that in a

real-life situation, the classroom teacher and special education teacher summarize a wide range of information on academic achievement. She believed that she had sufficient time to complete the activity and stated that a number of factors were important and useful in arriving at her decisions (see previous paragraph). Additional information that Ms. D desired included family information, information on the child's social adjustment and peer relations, and data on any previous efforts to help the child.

Summary. Ms. D's estimates of the incidence of various handicapping conditions were comparable to and/or slightly below the average estimates for school psychologists. She did not believe the child would be eligible for special education services, but thought that the child was likely to be learning disabled. However, she did not believe the child would have any difficulty acquiring reading or math skills. Rather, Ms. D stated that the child was likely to demonstrate a speech problem.

Ms. D reviewed six assessment devices during her evaluation of the child, but accessed technical information only once. She reviewed qualitative information about test performance four times. A review of her choice of assessment devices and her perception of their influence on her decisions suggested that the information selected might be a function of her understanding of the intent and purpose of those devices. She stated that adaptive behavior information had a significant effect on her decisions, even though she never reviewed information in this domain. It is possible that Ms. D felt she had gleaned this information from the qualitative test performance information on those devices that she had reviewed.

CHAPTER III

Special Educator Case Studies

This chapter summarizes the performances of four special educators during the computer-simulated assessment and decision-making program. Two with low pretest scores were selected from conditions 2 and 11; two with high pretest scores were selected from conditions 8 and 10.

Case 5: Ms. E

The case reviewed by Ms. E was that of a 10 year 4 month old boy who had been referred for academic problems (see condition 2, Appendix E[1]). All data presented to Ms. E during the simulation indicated the boy was functioning within the normal range for a student his age.

Background. Ms. E was a 46 year old reading resource teacher in a suburban school district. She received her Bachelor of Science degree from a state college and her Masters in Reading from a private college; one course beyond her Masters degree had been completed. Her academic preparation included 30 semester credits in special education, one statistics course, and two assessment and/or measurement courses.

Ms. E had 19 years of combined teaching experience with regular and special class children. She had no experience in providing non-teaching support services.

Pretest performance and expectations. On the pretest Ms. E scored 10 (40% correct). This is in the lower range of scores achieved by special educators on the pretest.

Ms. E's expectations as to the incidence of various handicapping conditions is presented in Table 11. Compared to the mean expectancies generated by the special educators, her estimates were consistently two

to seven times higher (see Table 2 and Ysseldyke et al., 1980a).

Insert Table 11 about here

Of the three factors, current life circumstances, developmental history, and extra-personal factors, Ms. E felt that current life circumstances and developmental history were important to consider in the assessment of an individual.

Review of assessment data. Five assessment devices were selected for review by Ms. E: two intelligence tests, one achievement test, one perceptual-motor device, and one measure of adaptive behavior (see Table 12). Ms. E accessed the technical information for all of those devices except the Wechsler Intelligence Scale for Children - Revised. The only device for which she did not request qualitative information was the Stanford Binet Intelligence Scales.

Insert Table 12 about here

Outcome decisions. (Eligibility and classification) Ms. E indicated that the referred student was likely to be eligible for special education services. She also felt that it was likely that this child was learning disabled or emotionally disturbed, but very unlikely that he was mentally retarded.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), possible placements within which to serve the child's educational needs, Ms. E responded as follows: 1 - regular class with consultation by resource teacher, 2 - regular class,

3 - part-time resource room, 6 - full time resource room/full time special class/extra-school setting.

(Prognoses) Ms. E indicated that the student was unlikely to have a speech problem, likely to have difficulty acquiring reading skills and very likely to have difficulty acquiring mathematics skills.

Factors believed to influence decisions. Ms. E indicated that the child's performance on the intellectual measures, perceptual-motor tests, and behavioral recordings had a very significant effect on her decisions. Also having a very significant effect were the referral statement of the problem and the discrepancies between expected and actual achievement. Information felt to have a significant effect included achievement test scores, adaptive behavior information, personality data, language test scores, and subtest score discrepancies. The child's sex was said to have an insignificant effect and his physical appearance to have a very insignificant effect. Ms. E was unsure about the influence of the child's socioeconomic status on her decisions.

Efficacy of the computer simulation. Ms. E felt that the computer simulation differed from real-life placement decision making in that it was done more rapidly and there was more information available, yet she felt that enough time was provided to complete the whole process. Behavior observations were the type of information felt to be most useful. Additional information that Ms. E indicated would be helpful included observation of the student in the classroom and a conference with the parents.

Summary. Ms. E's estimations of the incidence of various handicapping conditions was considerably higher than the average incidence estimated by

special educators. On the basis of her review of the referral information and assessment data, she indicated that it was likely that the student would be eligible for special education services. She also stated that it was likely that the student was learning disabled and/or emotionally disturbed and very likely that the student would have difficulties acquiring mathematics skills.

Ms. E reviewed five assessment devices. She requested technical and qualitative data on four of the five devices. Her responses to the decision questions indicated that her high incidence estimations of various handicapping conditions might have contributed to her feeling that the student was learning disabled and/or emotionally disturbed. Ms. E stated that several types of information (e.g., behavioral recordings, personality assessment data, language test scores) were very helpful to her. Since she had not requested any devices in these domains, it may be that she either misunderstood the directions and answered these questions on the basis of general experience, or that she felt that this information had been gleaned from the qualitative test information that she had accessed.

Case 6: Mr. F

The case reviewed by Mr. F was that of a 10 year 4 month old boy who had been referred for behavior problems (see condition 8, Appendix E). All data presented to Mr. F during the simulation indicated that the boy was functioning within the normal range for a student his age.

Background. Mr. F was a 38 year old resource teacher in a suburban school who held certificates in English, reading, and special education. He had taken 15 courses beyond his Masters degree. His academic

preparation included 12 special education, two statistics, and two measurement and/or assessment courses.

Mr. E had taught regular class children for eight years and exceptional children for four years.

Pretest performance and expectations. Mr. F scored a 15 on the pretest (60% correct). Compared to the scores of other special education personnel who participated in the study, this is in the high range.

Mr. F's expectations as to the incidence of various handicapping conditions is presented in Table 13. His estimations were consistently comparable to, or somewhat lower than, the average for special educators in this investigation (see Table 2 and Ysseldyke et al., 1980a).

Insert Table 13 about here

When asked which factors should be considered in the assessment of an individual, Mr. F indicated that current life circumstances, developmental history, and extra-personal factors were all important.

Review of assessment data. Mr. F selected seven assessment devices for review: one intelligence test, two achievement tests, one behavioral recording device, one measure of personality, one adaptive behavior scale, and one language test (see Table 14). When given the opportunity to access qualitative information for each assessment device, Mr. F did so only for the Woodcock Reading Mastery Tests. The Auditory Discrimination Test was the only device for which he requested technical information. After looking at the technical information on the Auditory Discrimination Test, Mr. F apparently accessed this device again, but did not request either technical or qualitative information.

Insert Table 14 about here

Outcome decisions. (Eligibility and classification) Mr. F felt that it was very likely that the student would be eligible for special education services. He indicated that it was very unlikely that the student was mentally retarded and unlikely that he was emotionally disturbed, but he was uncertain as to whether the child was learning disabled.

(Prognoses) In terms of making predictions about the child, Mr. F expressed the opinion that this student was very unlikely to have a speech problem, but likely to have difficulty in acquiring reading skills. He was undecided about whether the student would have difficulty acquiring mathematics skills.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), possible placements within which to serve this student's educational needs, Mr. F responded as follows: 1 - part time resource room, 2 - regular class with consultation by resource teacher, 3 - regular class, 4 - full time resource room, 5 - full time special class, and 6 - extra-school setting.

Factors believed to influence decisions. Mr. F stated that the child's performance on the adaptive behavior scale, the discrepancies between expected and actual achievement, and subtest score discrepancies all had a very significant effect on the decisions he made. Having a significant effect on his decisions were scores on intellectual measures, scores on measures of academic achievement, personality test data, behavioral recording data, and the child's physical appearance. Having an

insignificant influence were the language test data, and having a very insignificant effect were the perceptual-motor data, the student's sex, and his socioeconomic status.

Efficacy of the computer simulation. Mr. F said that the computer simulation differed from real-life placement decision practices in that there was no chance for discussion or exchange of views such as occurs at a staffing. He did not feel there was enough time to complete the process, and would have liked information about the child's school age (months in school, e.g., 5-6) and the child's comments on his behavior.

Summary. Mr. F's expectations for the incidence of various handicapping conditions were comparable to or somewhat lower than the average for special educators in the investigation. He indicated that the child was very likely to be eligible for special education services, but was unable to classify the child as a member of any of the diagnostic categories used in this study. He perceived the child as being very unlikely to demonstrate speech problems. However, he did indicate the child was likely to have difficulty acquiring reading skills; he was unsure about the extent to which the child might demonstrate difficulties acquiring math skills.

Mr. F selected seven assessment devices for review. He accessed technical information only once and qualitative information only once. A review of Mr. F's assessment device selections and his perceptions of their influence on his decisions suggested that test-based information was more influential than subject characteristics and subjective reports.

Case 7: Ms. G

The case reviewed by Ms. G was that of a 10 year 4 month old girl who was referred for behavior problems (see condition 11, Appendix E). All data presented to Ms. G during the simulation indicated that the girl was functioning within the normal range for a student her age.

Background. Ms. G was a 59 year old special education teacher in a suburban school district. She held a Bachelor of Arts degree plus thirty credits for 15 courses taken since receiving her degree. Her academic preparation included 15 special education, five statistics, and five assessment and/or measurement courses.

Ms. G had taught regular class children for 10 years and worked with exceptional children for five years. She also spent three years providing non-teaching support services to educational programs.

Pretest performance and expectations. Ms. G scored a 6 on the pretest (24% correct), which is low compared to the scores achieved by other special education personnel in the investigation.

Ms. G's expectancies as to the incidence of various handicapping conditions are shown in Table 15. Compared to the mean expectancies of special education teachers in the study, her estimates were consistently two to four times higher (see Table 2 and Ysseldyke et al., 1980a).

Insert Table 15 about here

When asked to consider the three factors, current life circumstances, developmental history, and extra-personal factors, Ms. G felt that current life circumstances and developmental history were important to consider in the assessment of an individual.

Review of assessment data. Five assessment devices were selected by Ms. G for review: one intelligence test, one measure of academic achievement, a behavioral recording method, one personality test, and one measure of language skills (see Table 16). When given the opportunity to access technical information, Ms. G did so for the behavioral recording and for the Illinois Test of Psycholinguistic Abilities. She also accessed the qualitative information for these two devices, as well as for the Peabody Individual Achievement Test.

Insert Table 16 about here

Outcome decisions. (Eligibility and classification) Ms. G believed the student would very likely be eligible for special education services and that it was very likely that the child was learning disabled, likely that she was emotionally disturbed, and very unlikely that she was mentally retarded.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), possible educational placements within which to serve this child, Ms. G gave the following responses: 1 - regular class with consultation by resource teacher/part time resource room, 3 - regular class, 4 - full time resource room, and 6 - full time special class/extra-school setting.

(Prognoses) In terms of making predictions about the child, Ms. G expressed the opinion that the student was very likely to have difficulty acquiring reading skills. She was not sure about whether the student would be likely to have a speech problem or would have difficulty in acquiring mathematics skills.

Factors believed to influence decisions. Ms. G indicated that the referral statement had the most significant effect on the decisions she had made. Having a significant effect were scores on achievement, personality, and language tests, data from behavioral recordings and adaptive behavior measures, discrepancies between expected and actual achievement, and subtest score discrepancies. The student's physical appearance and socioeconomic status also were said to have a significant effect on her decisions, while the student's sex and scores on perceptual-motor tests were said to have an insignificant effect.

Efficacy of computer simulation. While Ms. G indicated that enough time had been provided to complete this activity, she stated that she felt more rushed than in a real-life situation. She also noted that she had to keep in mind which buttons to press. When asked which information was the most helpful, she replied that the school testing results were the most useful in making her decision.

Summary. Ms. G's expectations as to the incidence of various handicapping conditions were consistently two to four times higher than the mean estimates of special educators who participated in the study. She indicated that the child was very likely to be eligible for special education services. She believed the child was possibly either learning disabled or emotionally disturbed, but not mentally retarded. She did perceive the child as being very likely to have difficulty acquiring reading skills but was unable to determine the extent to which the child might demonstrate speech difficulties or problems acquiring mathematics skills.

Ms. G reviewed five assessment devices during her evaluation of the child. She accessed technical information twice and qualitative data three times. A review of the choice of assessment devices and perceptions of their influence suggested that some information extracted from the measures might be a function of her understanding of the intent and purpose of the devices reviewed. Ms. G indicated that both data-based (i.e., tests) information and student characteristics were influential in her decisions. She stated that adaptive behavior data were influential even though she never accessed data from this domain. A plausible hypothesis is that Ms. G perceived qualitative test performance information and personality data as measures of adaptive behavior.

Case 8: Ms. H

Ms. H was asked to review the case of a 10 year 4 month old girl who had been referred for academic difficulties (see condition 10, Appendix E). All data presented to Ms. H during the simulation indicated that the girl was functioning within normal limits for a student her age.

Background. Ms. H was a 44 year old special education teacher in a suburban school district. She held teaching certificates in general elementary education and in special education. Ms. H had a Masters degree in special education and had taken 15 special education and three assessment and/or measurement courses.

Ms. H had experience in teaching regular class children for seven years, and exceptional children for six years part time and one year full time.

Pretest performance and expectations. Compared to the scores of the special education personnel participating in this investigation, Ms. H's score of 16 (64% correct) on the pretest is in the high range.

Ms. H's expectancies as to the incidence rates of various handicapping conditions are presented in Table 17. Compared to the expectancies indicated by the special education personnel in this study, her estimations were consistently at or below their means (see Table 2 and Ysseldyke et al., 1980a).

Insert Table 17 about here

Ms. H indicated that current life circumstances, developmental history, and extra-personal factors should all be considered in the assessment of an individual.

Review of assessment data. Ms. H selected eight assessment devices for review: one intelligence test, one measure of academic achievement, two perceptual-motor devices, one behavioral recording device, an adaptive behavior scale, and two measures of language skills (see Table 18). Ms. H requested technical information on the Memory for Designs Test, the Developmental Test of Visual-Motor Integration, the Peterson-Quay Behavior Problem Checklist, the AAMD Adaptive Behavior Scale (school version), and the Illinois Test of Psycholinguistic Abilities. She looked at the available qualitative information on all devices except the Peterson-Quay Behavior Problem Checklist and the Auditory Discrimination Test. Ms. H accessed the Iowa Test of Basic Skills twice; the first time she did not look at either the technical or the qualitative information, but the second time she requested the qualitative information.

Insert Table 18 about here

Outcome decisions. (Eligibility and classification) Ms. H indicated that it was likely that this student was eligible for special education services. She felt that it was likely that the student was learning disabled, but very unlikely that the child was mentally retarded or emotionally disturbed.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), possible placements within which to serve this student's educational needs, her response was: 1 - regular class with consultation by resource teacher, 2 - part time resource room, 3 - regular class, 4 - full time resource room, 5 - full time special class, and 6 - extra-school setting.

(Prognoses) Ms. H indicated that the student was likely to have difficulty acquiring both reading and mathematics skills. She was undecided about whether the student might demonstrate a speech problem.

Factors believed to influence decisions. Ms. H stated that the child's performance on the perceptual-motor devices and the discrepancies between expected and actual achievement had a very significant effect on the decisions made. Having a significant effect on her decisions were scores on intellectual, language, and achievement tests, performance on the adaptive behavior scale, and the referral statement of the problem. Personality test data and the behavioral recording information were said to have an insignificant influence, while the child's sex, socioeconomic status, and physical appearance were felt to have a very insignificant effect.

Efficacy of computer simulation. When asked how the computer simu-

lation differed from the real-life decision-making process, Ms. H felt the simulation was much more objective than the usual process and that it avoided some of the problems of staff interactions. Ms. H reported that she had enough time to complete the simulation activity and that she had found the qualitative interpretations of the student's performance especially helpful.

Summary. Ms. H's expectancies as to the incidence rates of various handicapping conditions were consistently at or below the mean expectancies for special educators who participated in this investigation. She indicated the child was likely to be eligible for special education services. In addition, she perceived the child as being likely to be learning disabled but very unlikely to be mentally retarded or emotionally disturbed. When asked to address some issues related to academic performance, Ms. H indicated the child was likely to have difficulty acquiring both reading and mathematics skills but unlikely to demonstrate speech difficulties.

Ms. H selected eight assessment devices for review during her evaluation of the child. She made extensive use of both technical and qualitative information. A review of Ms. H's assessment device selections and her perception of their influence on her decisions suggested that the decisions were to a great extent data based (i.e., based on test score information).

CHAPTER IV

Regular Educator Case Studies

The performances of four regular educators during the computer-simulated assessment and decision-making program are summarized in this chapter. Four regular educators were selected: two with low scores on the pretest from conditions 2 and 11, and two with high pretest scores from conditions 8 and 10 (see Table 1).

Case 9: Mr. I

The case presented to Mr. I for evaluation was a boy, aged 10 years 4 months, who had been referred for academic difficulties (see condition 2, Appendix E[1]). All data presented to Mr. I indicated that the boy was functioning within the normal range for a student his age.

Background. Mr. I was a 28 year old teacher in a suburban school district who held the position of unit lead teacher. He was certified to teach regular students in grades 1-6 in Minnesota and regular students in grades K-8 in Wisconsin. Mr. I had taken 12 graduate courses since earning his B.A.

Mr. I had taught regular classroom children for seven years; he had no experience in teaching special education or in providing non-teaching support services.

Pretest performance and expectations. Mr. I obtained a pretest score of 7 (28% correct), which is below average (low) when compared to scores obtained by other regular classroom teachers.

Mr. I's expectations for the incidence of various handicapping conditions are presented in Table 19. His estimates of the percentages of handicapped individuals within each category were considerably lower

than average estimates for regular classroom teachers (see Table 2 and Ysseldyke et al., 1980a). Exceptions were his estimate of boys having emotional disturbances, which was slightly higher than the group estimate, and his estimates of high SES individuals having emotional disturbance or learning disabilities, which were not significantly different from group estimates.

Insert Table 19 about here

When asked whether current life circumstances, developmental history, or extra-personal factors should be considered in the assessment of an individual, Mr. I indicated that all three are important factors.

Review of assessment data. Seven assessment devices were selected for review by Mr. I: two intelligence tests, two achievement tests, two perceptual-motor tests, and one behavioral recording device (see Table 20). Mr. I accessed technical information for three of the devices he selected: the Stanford-Binet Intelligence Scale, the Developmental Test of Visual-Motor Integration, and the frequency counting/event recording device. Qualitative information concerning the child's performance during testing was accessed for all devices selected, with the exception of the Stanford Diagnostic Reading Test and the Developmental Test of Visual-Motor Integration. The Bender Visual-Motor Gestalt Test was accessed on two occasions.

Insert Table 20 about here

Outcome decisions. (Eligibility and classification) Mr. I believed

the child was likely to be eligible for special education services. The child was judged as likely to be learning disabled, but very unlikely to be mentally retarded or emotionally disturbed.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), a series of possible placements within which to serve the child's educational needs, Mr. I responded: 1 - regular class/part time resource room, 3 - regular class with consultation by resource teacher, and 6 - full time resource room/full time special class/extra school setting.

(Prognoses) Mr. I perceived the child as being likely to have difficulty acquiring reading skills but unlikely to demonstrate a speech problem. Mr. I was unable to predict the child's acquisition of mathematics skills.

Factors believed to influence decisions. In rating factors as to their perceived influence on his decisions, the most significant factor was academic achievement. Scores on intellectual measures, discrepancies between expected and actual achievement, and the referral statement of problems were also considered to be influential. The factors considered to have a very insignificant effect were the child's sex, socioeconomic status, and physical appearance. Perceptual-motor tests, adaptive behavior, personality tests data, subtest score discrepancies, and scores on language tests also were considered to have an insignificant effect. Mr. I did not indicate whether behavior recordings had an effect on his decisions.

Efficacy of computer simulation. Mr. I felt the simulation was different from real-life placement decision practices in that, as a regular classroom teacher, he was not responsible for interpreting test re-

sults or making placement decisions in actual practice. Mr. I stated that he did not find any specific type of information more useful than another in arriving at decisions concerning the child. However, he did feel that a more thorough understanding of the various tests and interpretations of their scores might be helpful in the decision-making process. Mr. I indicated that enough time had been provided for him to complete the computer simulation activity.

Summary. Mr. I's expectations for the incidence of various handicapping conditions were considerably lower than the mean estimates for regular classroom teachers participating in the investigation. He believed the child was likely to be eligible for special education services and indicated that it was very unlikely that the child was mentally retarded or emotionally disturbed. However, Mr. I did suggest the child was likely to be learning disabled. He perceived the child as likely to have difficulty acquiring reading skills but could not determine the extent to which the child might have difficulty acquiring math skills. Mr. I indicated the child was unlikely to demonstrate a speech problem.

Mr. I reviewed seven assessment devices during his evaluation of the child. He selected one device (Bender Visual-Motor Gestalt Test) twice, accessing qualitative information on the first occasion and technical data the second time. A review of his selections indicated that he accessed either technical and/or qualitative information for all devices except the Stanford Diagnostic Reading Test. Mr. I's choice of assessment devices and his perception of their influence on his decisions appeared to be consistent; he had reviewed information from those domains he felt to be most influential in his decision making.

Case 10: Ms. J

The case presented to Ms. J was that of a 10 year 4 month old fifth-grade boy who had been referred for behavior problems (see condition 8, Appendix E). All data presented to Ms. J during the simulation indicated that the boy was functioning within the normal range for a student his age.

Background. Ms. J was a 30 year old first grade teacher who taught in a suburban school district. She held an elementary (grades 1-6) teaching certificate, and had taken six graduate courses since completing her B.A.

Ms. J had taught regular class children for nine years; although she had never taught a special class, she had taught exceptional children within the regular classroom.

Pretest performance and expectations. Ms. J scored a 15 on the pretest (60% correct). This is above average (high) when compared to scores of other regular classroom teachers participating in the simulation.

Ms. J's expectations for the incidence of various handicapping conditions are presented in Table 21. Her predictions were higher than average for regular classroom teachers for (a) minority children with behavior problems and speech/language difficulties, (b) low SES children with academic difficulty, behavior problems, emotional disturbance, learning disabilities, and speech/language difficulties, (c) high SES children with behavior problems, and (d) boys with emotional disturbance or speech/language difficulties. Ms. J's expectations were lower than average scores for (a) minority children with emotional disturbance,

(b) low SES children with sensory impairments, (c) high SES children with emotional disturbance or learning disabilities, (d) boys with learning disabilities, and (e) girls with academic difficulties or learning disabilities.

Insert Table 21 about here

When asked whether current life circumstances, developmental history, or extra-personal factors should be considered in the assessment of an individual, Ms. J indicated that all three are important factors.

Review of assessment data. Six assessment devices were selected for review by Ms. J: four intelligence tests, one achievement test, and one test of personality (see Table 22). Ms. J accessed technical information for two of the devices, the Stanford-Binet Intelligence Scale and the Peabody Picture Vocabulary Test. Qualitative information concerning the child's performance during testing was requested for every device selected.

Insert Table 22 about here

Outcome decisions. (Eligibility and classification) Ms. J believed the child unlikely to be eligible for special education services. She considered the child as very unlikely to be mentally retarded, unlikely to be learning disabled, and was unable to decide whether the child was emotionally disturbed.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), a series of possible placements within which to serve the child's educational needs her response was: 1 - part time resource room, 2 - full time resource room, 3 - regular

class, 4 - regular class with consultation by resource teacher, 5 - full time special class, and 6 - extra-school setting.

(Prognoses) Ms. J believed the child very likely to have difficulty acquiring reading skills but unlikely to demonstrate any speech problems; she was unable to predict the child's ability to acquire math skills.

Factors believed to influence decisions. Factors perceived as being very significant included scores on measures of academic achievement, personality data, and the referral statement of problems. Scores on intellectual measures, the child's sex, socioeconomic status, discrepancies between expected and actual achievement, and subtest score discrepancies were deemed significant. Ms. J indicated that scores on perceptual-motor tests, adaptive behavior, behavioral recordings, and scores on language tests had an insignificant effect on her decisions. She did not indicate whether the child's physical appearance had an effect.

Efficacy of the computer simulation. Ms. J indicated that the simulation was different from real-life placement decision practices since she had to choose tests rather than specialists (e.g., school psychologist, SLBP) doing so. She stated that enough time to complete the simulation activity was provided and that she did not find any specific type of information more useful than another. Ms. J made no recommendations for additional types of information to supplement existing data.

Summary. Ms. J's expectations for the incidence of various handicapping conditions were varied - both above and below the mean expectancies for regular educators who participated in the investigation. She indicated that, in her opinion, the child was unlikely to be eligible for special education services. In addition, she felt that the child was very unlikely to be mentally retarded and unlikely to be learning disabled; she

was unable to determine whether the child might be emotionally disturbed. Ms. J perceived the child as unlikely to demonstrate a speech problem, very likely to have difficulty acquiring reading skills. She was uncertain whether the child would have difficulty acquiring mathematics skills.

Ms. J reviewed six assessment devices during her evaluation of the child. She accessed the qualitative data for all measures and the technical information for only two devices. A review of Ms. J's choice of assessment devices and her perception of their influence on her decisions suggested that the information extracted might be a function of her understanding of the intent and purpose of those devices reviewed. Ms. J indicated that child characteristics (i.e., sex and socioeconomic status) were as influential as scores on intellectual measures, subtest score discrepancies, and discrepancies between expected and actual achievement. In addition, she indicated that scores on measures of academic achievement and personality test data had a very significant effect on the decisions she made.

Case 11: Ms. K

The case presented to Ms. K was that of a girl, aged 10 years 4 months, who had been referred for academic difficulties (see condition 11, Appendix E). All data presented to Ms. K indicated the girl was functioning within the normal range for a student her age.

Background. Ms. K was a 32 year old classroom teacher in a suburban elementary school. She held a teaching certificate in elementary education and had taken approximately 26 courses since receiving her

degree. Her academic preparation included six special education courses and one assessment/measurement course.

Ms. K had taught regular class children for 11 years. She had no special education teaching experience.

Pretest performance and expectations. Ms. K scored a 12 on the pretest (48% correct). This is one of the higher scores achieved by regular education teachers.

Ms. K's expectations as to the incidence rates of various handicapping conditions are presented in Table 23. For the most part, Ms. K's expectations were comparable to the mean expectancies of regular education teachers in the study (see Table 2 and Ysseldyke et al., 1980a). In a few cases (e.g., boys - Speech and Language Difficulties, minority - academic problems), Ms. K's estimations were considerably higher than the means for all regular educators.

Insert Table 23 about here

When asked to consider the three factors, current life circumstances, developmental history, and extra-personal factors, Ms. K indicated that all were important to consider in the assessment of students.

Review of assessment data. Seven assessment devices were chosen for review: two intelligence tests, one measure of academic achievement, a perceptual-motor test, a behavioral recording device, one personality test, and an adaptive behavior scale (see Table 24). When given the opportunity to access the technical information for these devices, Ms. K did so for the Bender Visual-Motor Gestalt Test, the Piers-Harris Self-

Concept Scale, and the Vineland Social Maturity Scale. Ms. K requested the available qualitative data for these three devices as well as for the Stanford-Binet Intelligence Scale.

Insert Table 24 about here

Outcome decisions. (Eligibility and classification) Ms. K felt that it was unlikely that this student would be eligible for special education services. She indicated that it was unlikely that the student was emotionally disturbed and very unlikely that she was either mentally retarded or learning disabled.

(Placement) When asked to rate, on a scale of one to six (1 = most appropriate, 6 = least appropriate), possible placements within which to serve this child's educational needs, Ms. K responded as follows: 1 - regular class with consultation by resource teacher, 2 - regular class, 6 - part time resource room/full time resource room/full time special class/extra-school setting.

(Prognoses) Ms. K expressed the opinion that this student was very unlikely to demonstrate either a speech problem or difficulties in acquiring mathematics skills. Ms. K was unsure about how likely the student was to have difficulties in acquiring reading skills.

Factors believed to influence decisions. Ms. K indicated that the referral statement of problems, the discrepancies between expected and actual achievement, and the intellectual and achievement test data had a very significant effect on her decisions; personality test data were perceived as having a significant effect. Having a very insignificant effect were: the student's performances on the perceptual-motor test,

the behavioral recording, the adaptive behavior scale, the child's sex and socioeconomic status, and the subtest score discrepancies. The scores on the language test and the student's physical appearance were felt to have an indeterminate effect on her decisions.

Efficacy of the computer simulation. In comparing the simulation exercise to the real-life placement decision process, Ms. K stated that communication with the child is very important. When asked whether any specific type of information was especially helpful, she replied that she could only use information with which she was familiar, such as IQ scores and standardized tests. Ms. K indicated that enough time had been provided to complete this activity, and she could think of no additional information that would have been helpful to her.

Summary. Ms. K's estimates of the incidence of various handicapping conditions were, for the most part, comparable to the mean expectancies of regular educators in this investigation. She indicated that the child was unlikely to be eligible for special education services, and perceived the child as neither being a member of any of the handicapping conditions presented in the investigation nor likely to demonstrate any difficulties with academic skill acquisition.

Ms. K reviewed seven assessment devices. She accessed both technical and qualitative information for three measures and only the qualitative information for a fourth device. A review of her selection of assessment devices and her perception of their influence on her decisions suggested that significant portions of her decisions were data based.

Case 12: Mr. L

The case presented to Mr. L for review and evaluation was a girl, aged 10 years 4 months, who had been referred for behavior problems (see condition 10, Appendix E). All data presented during the simulation indicated the girl was performing within the normal range for a student her age.

Background. Mr. L was a 33 year old elementary education teacher employed by a suburban school district. He had a bachelor's degree in elementary education and had completed 32 graduate courses since receiving his degree. His academic preparation included three courses in special education, one course in statistics, and one course in assessment and/or measurement.

Mr. L had 11 years of direct teaching experience with regular education students. Mr. L indicated that he had no direct teaching experience with special students nor had he provided non-teaching support services to educational programs.

Pretest performance and expectations. Mr. L scored a 7 on the pretest (28% correct). This is in the lower range of scores obtained by regular education teachers participating in the investigation.

Mr. L's expectations of incidence figures for various handicapping conditions are in Table 25. His estimates of the percentages of handicapped individuals within each category were consistently lower than the mean estimates for regular education teachers in the study (see Table 2 and Ysseldyke et al., 1980a).

Insert Table 25 about here

When asked whether current life circumstances, developmental history, or extra-personal factors should be considered in the assessment of an individual, he indicated that only current life circumstances and the child's developmental history were important.

Review of assessment data. Mr. L selected four assessment devices for review: one behavioral recording, two personality tests, and one measure of adaptive behavior (see Table 26). Mr. L accessed both the technical and qualitative information for all devices he reviewed.

Insert Table 26 about here

Outcome decisions. (Eligibility and classification) Mr. L believed the child was likely to be eligible for special education services, but very unlikely to be mentally retarded and unlikely to be learning disabled. He felt the child was likely to be emotionally disturbed.

(Placement) When asked to rank, on a scale of one to six (1 = most appropriate, 6 = least appropriate), a series of possible placements within which to serve the child's educational needs, his response was: 1 - part time resource, 2 - regular class with consultation by resource teacher, 3 - full time resource room, 4 - regular class, and 6 - full time special class/extra-school setting.

(Prognoses) Mr. L believed the child was unlikely to demonstrate a speech problem or have difficulty acquiring math skills; he was undecided as to the child's ability to acquire reading skills.

Factors believed to influence decisions. Personality data, behavioral recordings, and the referral statement of problems were felt to

have very significant effects. Factors having a significant effect included the child's socioeconomic status, adaptive behavior, and subtest score discrepancies. Scores on measures of intellectual and academic achievement were deemed very insignificant. Mr. L indicated that discrepancies between expected and actual achievement, the child's physical appearance, and scores on language tests had no perceived influence on his decisions. The child's sex and scores on perceptual-motor tests were viewed as being insignificant.

Efficacy of the computer simulation. Mr. L indicated that the simulation differed from real-life placement decision-making practices in that regular classroom teachers would not choose the tests nor be the only individuals drawing conclusions. He felt that a specialist must be involved - an individual who is more knowledgable about assessment. He believed that sufficient time was provided to complete the activity, and stated that he had found specific types of information more useful than others in arriving at decisions (see Factors believed to influence decisions). Additional information that Mr. L desired included a more extensive description of the characteristics of each test available for review.

Summary. Mr. L's expectations on the incidence of various handicapping conditions were consistently lower than the mean estimates obtained for regular education teachers. During the simulation, he indicated that the child was likely to be eligible for special education under the diagnostic classification of emotional disturbance. He perceived the child as being unlikely to have difficulty acquiring specific academic skills and unlikely to demonstrate a speech problem.

Mr. L. reviewed four assessment devices during his evaluation of the child, accessing both the technical and qualitative information for all devices. A review of his selection of assessment devices and his perception of their influence on his decisions suggested that the types of information extracted for decision making were those seen to influence his decisions.

CHAPTER V

Discussion

This report was compiled to provide a description of the process followed by different individuals as they make specific kinds of decisions about specific kinds of students. Analyses of the process by Ysseldyke et al. (1980), using group data, revealed certain consistencies in the process. For example, a majority of the decision makers declared the normal child eligible for special education services; regular educators were most likely to declare the child eligible. Further, the child was most likely to be characterized as learning disabled, and to be expected to have difficulty in reading. The most frequently recommended placements were regular class with resource teacher consultation and part-time resource room.

The description of the process and decisions from the perspective of the individual decision maker reveals that, despite the average process that can be described, a great deal of variability exists. This variability cannot be explained by the role of the decision maker, the knowledge of the decision maker, or the type of student about whom decisions were made. For example, the group data suggested that school psychologists tended to use frequency counts, event recordings, and projective tests more often than other professionals (Ysseldyke et al., 1980). Yet, in the sample of professionals studied here, all used these devices, regardless of role. Likewise, those individuals with high pretest knowledge in this sample did not assess the student in a manner different from those with low pretest knowledge. Those individuals assessing a student referred for behavioral difficulties did not assess the student in a manner different

from those who assessed a student referred for academic difficulties. The group data further suggested that regular educators were most likely to declare the child eligible for special education services. Yet, in the present sample, all four of the special educators declared the child eligible, but only two of the four school psychologists and two of the four regular educators did so. Of course, the individual data presented here reflect the process of a limited number of individuals, but they do highlight the fact that group findings do not necessarily represent individuals within the group.

Perhaps even more striking in the individual data is the variability that occurs within individuals. One individual declared the child ineligible for services and indicated the most appropriate placement would be the regular class with consultation from a resource teacher. Another declared the child ineligible, but concluded the student was probably LD and should be placed part time in a resource room. One individual declared the student eligible but was unable to classify the student as LD, ED, or MR. Some individuals assessed the student on a variety of assessment devices and then declared that the factor having the most influence on their decision was something about which they collected no data.

The multidisciplinary team approach to psychoeducational decision making has been lauded as a way to ensure that different perspectives are brought to bear on the decisions to be made. The data from the individuals included here suggest that variability in the process, if not also different perspectives, is produced simply because more than one individual is involved. However, the assessment and decision-making processes

represented here are those that occur in isolation - without the influence of other team members. The degree to which individual perspectives influence the team process is an area for further study.

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Footnotes

Bob Algozzine is also Associate Professor in the Department of Special Education at the University of Florida, Gainesville.

Appreciation is extended to all individuals who participated in this research and to their school districts.

[1]All appendices referred to in this report are printed in J. E. Ysseldyke, B. Alogozzine, R. R. Regan, M. Potter, & L. Richey, Technical Supplement for Computer-Simulated Investigations of the Psychoeducational Assessment and Decision-Making Process (Research Report No. 34). Minneapolis: University of Minnesota, Institute for Research on Learning Disabilities, 1980b.

Table 1

Case Study Subjects

Role	Case Number	Pretest Score	Referral Condition[a]
School Psychologist			
	1	Low	Academic (02)
	2	High	Behavioral (08)
	3	Low	Behavioral (11)
	4	High	Academic (10)
Special Educator			
	5	Low	Academic (02)
	6	High	Behavioral (08)
	7	Low	Behavioral (11)
	8	High	Academic (10)
Regular Educator			
	9	Low	Academic (02)
	10	High	Behavioral (08)
	11	Low	Behavioral (11)
	12	High	Academic (10)

[a]Numbers in parentheses indicate the referral conditions employed by Ysseldyke et al. (1980).

Table 2

Mean Expectancies for Percentage of Individuals with Handicapping Conditions by Role

		MINORITY			LOW SES			HIGH SES			BOY			GIRL		
		School Psychologists	Special Educators	Regular Educators	School Psychologists	Special Educators	Regular Educators	School Psychologists	Special Educators	Regular Educators	School Psychologists	Special Educators	Regular Educators	School Psychologists	Special Educators	Regular Educators
Academic Difficulties	$\bar{X}$	28.3	2.48	32.7	27.2	23.6	32.5	11.6	10.8	13.1	17.3	19.0	19.3	11.8	9.5	13.1
	SD	15.9	18.8	25.3	9.9	15.3	24.1	6.3	10.0	9.6	5.2	17.1	14.4	4.7	7.7	9.9
Behavior Problems	$\bar{X}$	16.8	20.3	25.9	19.3	19.3	28.0	11.7	10.8	15.3	15.4	13.4	21.3	8.7	7.3	10.9
	SD	12.1	18.7	22.3	10.2	16.2	24.5	5.6	12.2	10.9	6.6	14.2	18.9	5.3	7.9	9.0
Emotional Disturbance	$\bar{X}$	9.0	13.2	16.4	9.4	11.3	19.0	8.0	8.2	10.4	5.6	8.9	9.6	5.8	6.5	7.8
	SD	10.8	18.4	17.2	10.0	13.2	19.2	8.6	10.4	8.6	3.2	12.7	9.0	4.7	7.5	7.3
Learning Disabilities	$\bar{X}$	13.0	16.1	21.6	14.7	12.2	20.4	7.7	8.3	10.6	10.2	12.8	14.0	6.0	6.8	9.2
	SD	9.4	16.1	19.1	10.3	11.9	19.8	5.2	8.2	8.9	5.8	13.2	13.8	3.3	8.9	8.3
Mental Retardation	$\bar{X}$	6.3	6.7	7.4	6.1	9.0	7.0	3.0	4.1	5.3	4.8	7.3	4.0	3.0	4.6	5.0
	SD	7.4	10.4	11.3	5.8	14.8	7.9	2.5	4.5	6.5	5.9	13.3	4.0	2.1	5.9	7.2
Physical Handicaps	$\bar{X}$	3.0	6.5	6.5	3.9	5.7	6.0	3.6	4.1	5.6	2.8	4.4	5.0	2.4	4.3	5.2
	SD	2.7	9.3	8.3	5.2	8.5	7.9	3.5	5.0	6.0	2.3	6.0	7.7	2.2	6.2	6.6
Sensory Impairments	$\bar{X}$	4.5	7.2	7.7	4.7	6.1	9.1	3.6	4.7	6.1	3.6	5.4	5.4	3.5	4.6	5.9
	SD	5.7	11.4	8.1	5.6	8.9	11.4	3.2	5.9	6.2	3.5	6.1	5.5	4.2	5.9	6.4
Speech and Language Difficulties	$\bar{X}$	12.6	17.6	18.9	10.6	15.5	19.9	6.0	7.0	8.2	6.9	9.5	10.5	5.2	6.4	6.7
	SD	15.0	19.7	18.4	9.8	17.8	21.9	4.1	7.9	7.5	4.4	10.8	11.8	3.2	6.9	5.5

Table 3

Case 1 (School Psychologist): Expectations for Percentages of Individuals With Handicapping Conditions

Handicap	Minority	Low SES	Hi SES	Boys	Girls
Academic Difficulties	65.0	30.0	3.0	10.0	5.0
Behavior Problems	3.0	20.0	15.0	25.0	3.0
Emotional Disturbance	50.0	20.0	20.0	8.0	10.0
Learning Disabilities	30.0	50.0	10.0	15.0	8.0
Mental Retardation	10.0	10.0	10.0	5.0	5.0
Physical Handicaps	10.0	10.0	10.0	5.0	5.0
Sensory Impairments	10.0	5.0	10.0	5.0	5.0
Speech and Language Difficulties	30.0	15.0	5.0	10.0	8.0

Table 4

Case 1 (School Psychologist): Devices Selected, Order of Selection and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a]	
		Technical	Qualitative
Intelligence Tests			
Stanford-Binet Intelligence Scale	7	-	-
Wechsler Intelligence Scale for Children - Revised	1	-	+
Achievement Tests			
Stanford Achievement Test	2	-	+
Peabody Individual Achievement Test	8	-	+
Wide Range Achievement Test	3	+	-
Perceptual-Motor Tests			
Bender Visual-Motor Gestalt Test	4	-	+
Developmental Test of Visual-Motor Integration	5	-	+
Personality Tests			
Thematic Apperception Test	6	-	-

[a]A + indicates that the information was requested; a - indicates that it was not requested.

Table 5

Case 2 (School Psychologist): Expectations for Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	Hi SES	Boys	Girls
Academic Difficulties	35.0	30.0	15.0	20.0	10.0
Behavior Problems	20.0	15.0	10.0	10.0	3.0
Emotional Disturbance	15.0	15.0	5.0	5.0	6.0
Learning Disabilities	25.0	15.0	5.0	8.0	3.0
Mental Retardation	5.0	5.0	2.0	2.0	2.0
Physical Handicaps	3.0	3.0	2.0	2.0	2.0
Sensory Impairments	2.0	5.0	3.0	3.0	3.0
Speech and Language Difficulties	10.0	10.0	5.0	5.0	5.0

Table 6

Case 2 (School Psychologist): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a]	
		Technical	Qualitative
Intelligence Tests			
Wechsler Intelligence Scale for Children - Revised	1	+	+
Achievement Tests			
Peabody Individual Achievement Test	2	+	+
Perceptual-Motor Tests			
Bender Visual-Motor Gestalt Test	3	+	+
Personality Tests			
Thematic Apperception Test	4	+	+

[a] A + indicates that the information was requested.

Table 7

Case 3 (School Psychologist): Expectations for Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	Hi SES	Boys	Girls
Academic Difficulties	75.0	50.0	10.0	20.0	20.0
Behavior Problems	60.0	50.0	25.0	25.0	10.0
Emotional Disturbance	5.0	5.0	5.0	5.0	5.0
Learning Disabilities	25.0	15.0	5.0	15.0	5.0
Mental Retardation	25.0	15.0	10.0	5.0	5.0
Physical Handicaps	15.0	25.0	10.0	5.0	5.0
Sensory Impairments	25.0	15.0	10.0	15.0	5.0
Speech and Language Difficulties	60.0	40.0	10.0	10.0	10.0

Table 8

Case 3 (School Psychologist): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a]	
		Technical	Qualitative
Intelligence Tests			
Wechsler Intelligence Scale for Children - Revised	4	-	+
Achievement Tests			
Peabody Individual Achievement Test	5	-	+
Durrell Analysis of Reading Difficulty	6	-	-
Behavioral Recordings			
Frequency Counting or Event Recordings	1	+	-
Peterson-Quay Behavior Problem Checklist	2	+	+
Language Tests			
Auditory Discrimination Test	3	-	-

[a]A + indicates that the information was requested; a - indicates that it was not requested.

Table 9

Case 4 (School Psychologist): Expectations for Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	Hi SES	Boys	Girls
Academic Difficulties	30.0	25.0	10.0	15.0	10.0
Behavior Problems	5.0	5.0	5.0	15.0	10.0
Emotional Disturbance	5.0	5.0	10.0	10.0	10.0
Learning Disabilities	15.0	15.0	5.0	10.0	8.0
Mental Retardation	5.0	5.0	2.0	2.0	2.0
Physical Handicaps	1.0	1.0	1.0	1.0	1.0
Sensory Impairments	1.0	1.0	1.0	1.0	1.0
Speech and Language Difficulties	10.0	5.0	3.0	5.0	3.0

Table 10

Case 4 (School Psychologist): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a]	
		Technical	Qualitative
Intelligence Tests			
Wechsler Intelligence Scale for Children - Revised	1	-	+
Achievement Tests			
Peabody Individual Achievement Test	6	-	+
Wide Range Achievement Test	2	-	+
Perceptual-Motor Tests			
Bender Visual-Motor Gestalt Test	3	-	+
Behavioral Recordings			
Peterson-Quay Behavior Problem Checklist	5	+	-
Personality Tests			
Thematic Apperception Test	4	-	-

[a]A + indicates that the information was requested; a - indicates that it was not requested.

Table 11

Case 5 (Special Educator): Expectations for Percentages of Individuals with Handicapping Conditions

	Minority	Low SES	High SES	Boys	Girls
Academic Difficulties	60.0	65.0	30.0	60.0	20.0
Behavior Problems	60.0	60.0	40.0	60.0	20.0
Emotional Disturbance	60.0	70.0	30.0	60.0	25.0
Learning Disabilities	60.0	60.0	30.0	50.0	30.0
Mental Retardation	50.0	50.0	20.0	30.0	20.0
Physical Handicaps	50.0	50.0	20.0	30.0	25.0
Sensory Impairments	50.0	50.0	25.0	20.0	20.0
Speech and Language Difficulties	70.0	70.0	30.0	40.0	20.0

Table 12

Case 5 (Special Educator): Devices Selected, Order of Selection, Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a] Technical	Qualitative
Intelligence Tests			
Stanford-Binet Intelligence Scales	2	+	-
Wechsler Intelligence Scale for Children - Revised	1	-	+
Achievement Tests			
Metropolitan Achievement Test	3	+	+
Perceptual-Motor Tests			
Purdue Perceptual Motor Survey	4	+	+
Adaptive Behavior Scales			
AAMD Adaptive Behavior Scale	5	+	+

[a]A + indicates that the information was requested; a - indicates that it was not requested.

Table 13

Case 6 (Special Educator): Expectations of Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	High SES	Boys	Girls
Academic Difficulties	10.0	10.0	4.0	12.0	4.0
Behavior Problems	15.0	15.0	6.0	8.0	5.0
Emotional Disturbance	10.0	8.0	6.0	8.0	6.0
Learning Disabilities	12.0	10.0	5.0	7.0	3.0
Mental Retardation	4.0	8.0	4.0	6.0	2.0
Physical Handicaps	5.0	5.0	4.0	5.0	5.0
Sensory Impairments	2.0	5.0	5.0	5.0	4.0
Speech and Language Difficulties	15.0	10.0	5.0	6.0	2.0

Table 14

Case 6 (Special Educator): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a] Technical	Qualitative
Intelligence Tests			
Wechsler Intelligence Scale for Children - Revised	1	-	-
Achievement Tests			
California Achievement Test	2	-	-
Woodcock Reading Mastery Tests	3	-	+
Behavioral Recordings			
Peterson-Quay Behavior Problem Checklist	6	-	-
Personality Tests			
Piers-Harris Self-Concept Scale	7	-	-
Adaptive Behavior Scales			
AAMD Adaptive Behavior Scale (School Version)	8	-	-
Language Tests			
Auditory Discrimination Test[b]	4/5	+/-	-/-

[a] A + indicates that the information was requested; a - indicates that it was not requested.

[b] Device was selected twice.

Table 15

Case 7 (Special Educator): Expectations for Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	High SES	Boys	Girls
Academic Difficulties	60.0	30.0	20.0	30.0	20.0
Behavior Problems	60.0	40.0	30.0	30.0	20.0
Emotional Disturbance	60.0	30.0	20.0	20.0	20.0
Learning Disabilities	60.0	40.0	20.0	30.0	30.0
Mental Retardation	40.0	10.0	10.0	10.0	10.0
Physical Handicaps	30.0	20.0	10.0	10.0	10.0
Sensory Impairments	30.0	20.0	10.0	10.0	10.0
Speech and Language Difficulties	50.0	40.0	10.0	10.0	20.0

Table 16

Case 7 (Special Educator): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a]	
		Technical	Qualitative
Intelligence Tests			
Stanford-Binet Intelligence Scale	2	-	-
Achievement Tests			
Peabody Individual Achievement Test	1	-	+
Behavioral Recordings			
Interval or Time Samplings	3	+	+
Personality Tests			
Piers-Harris Self-Concept Scale	4	-	-
Language Tests			
Illinois Test of Psycho-linguistic Abilities	5	+	+

[a]A + indicates that the information was requested; a - indicates that it was not requested.

Table 17

Case 8 (Special Educator): Expectancies for Percentage of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	High SES	Boys	Girls
Academic Difficulties	25.0	25.0	5.0	7.0	5.0
Behavior Problems	5.0	5.0	5.0	5.0	5.0
Emotional Disturbance	5.0	5.0	5.0	5.0	5.0
Learning Disabilities	10.0	10.0	5.0	7.0	5.0
Mental Retardation	5.0	5.0	5.0	5.0	5.0
Physical Handicaps	5.0	5.0	5.0	5.0	5.0
Sensory Impairments	5.0	5.0	5.0	5.0	5.0
Speech and Language Difficulties	15.0	10.0	5.0	5.0	5.0

Table 18

Case 8 (Special Educator): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a] Technical	Qualitative
Intelligence Tests			
Wechsler Intelligence Scale for Children - Revised	1	-	-
Achievement Tests			
Iowa Test of Basic Skills[b]	6/7	-/-	-/+
Perceptual Motor Tests			
Memory for Designs Test	5	+	+
Developmental Test of Visual-Motor Integration	4	+	+
Behavioral Recordings			
Peterson-Quay Behavior Problem Checklist	8	+	-
Adaptive Behavior Scales			
AAMD Adaptive Behavior Scale (School Version)	9	+	+
Language Tests			
Auditory Discrimination Test	2	-	-
Illinois Test of Psycho-linguistic Abilities	3	+	+

[a] A + indicates that the information was requested; a - indicates that it was not requested.

[b] Device was selected twice.

Table 19

Case 9 (Regular Educator): Expectations for Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	High SES	Boys	Girls
Academic Difficulties	10.0	10.0	10.0	10.0	5.0
Behavior Problems	10.0	10.0	10.0	10.0	0.5
Emotional Disturbance	10.0	0.0	10.0	10.0	0.5
Learning Disabilities	10.0	1.0	10.0	10.0	0.5
Mental Retardation	0.1	0.1	1.0	1.0	0.1
Physical Handicaps	0.5	0.5	1.0	0.1	0.1
Sensory Impairments	0.5	0.8	1.0	0.1	0.1
Speech and Language Difficulties	0.5	0.1	1.0	0.1	0.1

Table 20

Case 9 (Regular Educator): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a] Technical	Qualitative
Intelligence Tests			
Stanford-Binet Intelligence Scale	1	+	+
Otis-Lennon Mental Ability Tests	2	-	+
Achievement Tests			
Stanford Achievement Test	7	-	+
Stanford Diagnostic Reading Test	8	-	-
Perceptual-Motor Tests			
Bender Visual-Motor Gestalt Test[b]	3/4	-/+	+/-
Developmental Test of Visual-Motor Integration	5	+	-
Behavioral Recordings			
Frequency counting or event recording	6	+	+

[a]A + indicates that the information was requested; a - indicates that it was not requested.

[b]This device was selected twice.

Table 21

Case 10 (Regular Educator): Expectations for Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	High SES	Boys	Girls
Academic Difficulties	30.0	50.0	10.0	20.0	5.0
Behavior Problems	20.0	75.0	20.0	20.0	10.0
Emotional Disturbance	20.0	60.0	5.0	20.0	5.0
Learning Disabilities	20.0	30.0	5.0	5.0	5.0
Mental Retardation	5.0	5.0	5.0	5.0	5.0
Physical Handicaps	5.0	5.0	5.0	5.0	5.0
Sensory Impairment	5.0	5.0	5.0	5.0	5.0
Speech and Language Difficulties	30.0	75.0	5.0	20.0	5.0

Table 22

Case 10 (Regular Educator): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a] Technical	Qualitative
Intelligence Tests			
Stanford-Binet Intelligence Scale	1	+	+
Wechsler Intelligence Scale for Children - Revised	2	-	+
Peabody Picture Vocabulary Test	3	+	+
Goodenough-Harris Drawing Test	4	-	+
Achievement Tests			
Iowa Test of Basic Skills	6	-	+
Personality Tests			
Thematic Apperception Test	5	-	+

[a]A + indicates that the information was requested; a - indicates that it was not requested.

Table 23

Case 11 (Regular Educator): Expectations for Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	High SES	Boys	Girls
Academic Difficulties	50.0	75.0	5.0	30.0	20.0
Behavior Problems	50.0	75.0	25.0	75.0	10.0
Emotional Disturbance	10.0	50.0	10.0	10.0	20.0
Learning Disabilities	50.0	50.0	5.0	20.0	20.0
Mental Retardation	5.0	25.0	5.0	5.0	5.0
Physical Handicaps	5.0	25.0	5.0	5.0	5.0
Sensory Impairments	10.0	25.0	5.0	5.0	5.0
Speech and Language Difficulties	25.0	99.0	5.0	50.0	5.0

Table 24

Case 11 (Regular Educator): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a]	
		Technical	Qualitative
Intelligence Tests			
Stanford-Binet Intelligence Scale	1	-	+
Wechsler Intelligence Scale for Children - Revised	7	-	-
Achievement Tests			
Stanford Achievement Test	3	-	-
Perceptual-Motor Tests			
Bender Visual-Motor Gestalt Test	6	+	+
Behavioral Recordings			
Frequency Counting or Event Recordings	2	-	-
Personality Tests			
Piers-Harris Self-Concept Scale	4	+	+
Adaptive Behavior Scales			
Vineland Social Maturity Scale	5	+	+

[a]A + indicates that the information was requested; a - indicates that it was not requested.

Table 25

Case 12 (Regular Educator: Expectations for Percentages of Individuals with Handicapping Conditions

Handicap	Minority	Low SES	High SES	Boys	Girls
Academic Difficulties	10.0	10.0	5.0	5.0	10.0
Behavior Problems	5.0	5.0	5.0	10.0	3.0
Emotional Disturbance	5.0	5.0	3.0	3.0	3.0
Learning Disabilities	5.0	5.0	5.0	5.0	5.0
Mental Retardation	1.0	1.0	1.0	1.0	1.0
Physical Handicaps	1.0	1.0	1.0	1.0	1.0
Sensory Impairments	4.0	6.0	6.0	6.0	6.0
Speech and Language Difficulties	5.0	5.0	5.0	5.0	5.0

Table 26

Case 12 (Regular Educator): Devices Selected, Order of Selection, and Additional Information Accessed

Domains and Devices Selected	Order of Selection	Information Accessed[a]	
		Technical	Qualitative
Behavioral Recordings			
Peterson-Quay Behavior Problem Checklist	2	+	+
Personality Tests			
Piers-Harris Self-Concept Scale	1	+	+
School Apperception Method	4	+	+
Adaptive Behavior Scales			
AAMD Adaptive Behavior Scale (School Version)	3	+	+

[a]A + indicates that the information was requested.

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